

AO 88B (Rev. 01/09) Subpoena to Produce Documents, Information, or Objects or to Permit Inspection of Premises

## UNITED STATES DISTRICT COURT

for the  
Northern District of Georgia

Donald and Natalie Robohm

*Plaintiff*

v.

State Farm Fire and Casualty Company

*Defendant*

Civil Action No. 1:08cv490 LTS/RHW

(If the action is pending in another district, state where:  
Southern District of Mississippi)SUBPOENA TO PRODUCE DOCUMENTS, INFORMATION, OR OBJECTS  
OR TO PERMIT INSPECTION OF PREMISESTo: Federal Emergency Management Agency (FEMA), c/o Regional Administrator  
3003 Chamblee Tucker Road, Atlanta, GA 30341

**Production:** **YOU ARE COMMANDED** to produce at the time, date, and place set forth below the following documents, electronically stored information, or objects, and permit their inspection, copying, testing, or sampling of the material:

Any and all records, in any format, photographs, estimates, appraisals, etc., pertaining to the property of Donald and Natalie Robohm, 423 East Beach Drive, Ocean Springs, Mississippi, for damages resulting from Hurricane Katrina which occurred on or about August 29, 2005.

Place: Hickman, Goza & Spragins, P.O. Drawer 668, 1305 Madison Avenue, Oxford, MS 38655	Date and Time: 10/29/2009
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☐ **Inspection of Premises:** **YOU ARE COMMANDED** to permit entry onto the designated premises, land, or other property possessed or controlled by you at the time, date, and location set forth below, so that the requesting party may inspect, measure, survey, photograph, test, or sample the property or any designated object or operation on it.

Place:	Date and Time:
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The provisions of Fed. R. Civ. P. 45(c), relating to your protection as a person subject to a subpoena, and Rule 45 (d) and (e), relating to your duty to respond to this subpoena and the potential consequences of not doing so, are attached.

Date: 10/13/2009

CLERK OF COURT

OR

Signature of Clerk or Deputy Clerk

Attorney's signature

The name, address, e-mail, and telephone number of the attorney representing (name of party)

State Farm Fire and Casualty Company, who issues or requests this subpoena, are:

H. Scot Spragins, Attorney at Law, P.O. Drawer 668, Oxford, MS 38655; 662-234-4000  
sspragins@hickmanlaw.com; mwheeler@hickmanlaw.com

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Civil Action No.

**PROOF OF SERVICE***(This section should not be filed with the court unless required by Fed. R. Civ. P. 45.)*

This subpoena for (name of individual and title, if any) Federal Emergency Management Agency, Regional Admin. c/o  
 was received by me on (date) 10/13/09.

☐ I personally served the subpoena on the individual at (place) \_\_\_\_\_

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<input type="checkbox"/> I have completed items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. <input type="checkbox"/> Print your name and address on the reverse so that we can return the card to you. <input type="checkbox"/> Attach this card to the back of the mailpiece, or on the front if space permits.		A. Signature <u>[Signature]</u> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee B. Received by (Printed Name) <u>Tricia Parker</u> C. Date of Delivery <u>10/13/09</u> D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input type="checkbox"/> No If YES, enter delivery address below:	
1. Article Addressed to: <u>Federal Emergency Management Agency (FEMA)</u> <u>c/o Regional Administrator</u> <u>3003 Chamblee Tucker Road</u> <u>Atlanta, GA 30341</u>		3. Service Type <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.	
2. Article Number (Transfer from service label) <u>7008 1830 0005 0382 6733</u>		4. Restricted Delivery? (Extra Fee) <input checked="" type="checkbox"/> Yes	

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

My fees are \$ \_\_\_\_\_ for travel and \$ \_\_\_\_\_ for services, for a total of \$ 0.00.

I declare under penalty of perjury that this information is true.

Date: 10/22/09

TRICIA PARKER  
 Server's signature

Tricia Parker, Paralegal  
 Printed name and title

1305 Madison Avenue, Oxford Ms  
 Server's address

Additional information regarding attempted service, etc: